Attendant Care Meeting Agenda Tuesday - January 16, 2007

- I. Welcome/Introductions
- **II.** Overview of Consumer-Directed Care
- III. Overview/Discussion of Issues
 - Hiring
 - Background Checks
 - Worker Training
 - Worker Benefits
 - Tasks Delegated to Workers
 - Training programs/manuals
- IV. Timelines/Goals/Objectives
- **V. Future Meeting Dates**
- VI. Responsibilities for Next Meeting
- VII. Adjournment

Consumer Directed Care – Attendant Care Sub-Group

Date of Meeting: January 16, 2007

Minutes Prepared By: Jakenna Lebsock, P/GLTC

1. Purpose of Meeting

- Member Introductions
- Overview of Consumer Directed Care
- Discussion Topics for Consideration
- Define Goals and Objectives for Sub-Group
- Identify Items Needing Further Research/Tasks for Next Meeting
- Define Meeting Framework

2. Attendance at Meeting				
Name	Company			
John Black	AHCCCS			
Denise Chambers	P/GLTC			
April Charpiot	Member Representative			
Fernando Cruz	ABIL			
Gwen Dean	ABIL			
Tony DiRienzi	SILC			
Joanne Helmer	Evercare			
Jane Hjeldness	Heart Felt Help			
Jakenna Lebsock	P/GLTC			
Alan Schafer	AHCCCS			
Liz Toone	Yavapai LTC			
Absent:				

3. Meeting Notes, Decisions, Issues

The meeting started with a welcome and introductions. Alan Schafer, AHCCCS, was available during the first portion of the meeting to assist with providing a CDC overview as well as to answer initial questions for the group members.

Q. Are there consistencies among states regarding how the CDC programs are set up?

 There are core components that are seen throughout; however, there are then several options for how the programs are provided.

Q. What is the projected start date of the program?

The target date for this project is October 1, 2007. We would like to be at 85% or so by the target date. There is no specific timeframe for individual program components that are tabled until after the initial startup, i.e. – purchasing household items that would increase efficiency of caregiver (washers/dryers).

Q. Will skilled services be allowed with this program and if so, which group(s) need to address the issue?

The legal sub-group will be addressing skilled services, along with Quality Management.
However, Attendant care may want to look at skilled services as well, especially regarding any
type of training that should be required for caregivers, etc. The Arizona Board of Nursing is very
specific in Arizona regarding nursing practices.

Q. Where is the money for this program coming from and who is ultimately liable for the program?

• Money for the program is coming from AHCCCS. There is less risk assumed with CDC programs; however, the program must still be designed to account for areas of risk, etc.

Q. Will there be any sort of evaluation process for the program?

• The Quality Management sub-group will look at this from a programmatic perspective. There will have to be a way to address individuals who make poor choices; some of this will be self-regulated, i.e – bad employers = employee turnover. If there is a lot of turnover, it should serve as a warning sign to follow-up with the member and see what the problem is.

Q. Will there be an instrument to monitor the care that is provided?

- Monitoring will most likely be team-orientated: caregivers will have some responsibility, CM's will
 provide some oversight, and members will have personal responsibility. Training may be a
 requirement in some areas in order to prepare the above individuals for their new roles.
- Building training into Attendant Care would be ideal, especially if tiered training is designed caregivers should have some baseline requirements and then could choose to pursue additional tiers. With additional training could come increased pay, etc. which would be at the consumer's discretion.
- Members will have a responsibility to take care of their caregivers to some extent; if not, they won't stay.
- Care giving can have a huge affect on marriages, family situations, etc. Burnout and respite
 options need to be addressed.

Q. How will relational care affect respite care?

 This is attendant care only for now; we don't want to focus on an additional service concept at this time.

Q. Will hired spouses be eligible for respite?

• Spouses will be limited to 40 hours a week; respite will most likely be allowed, but will have to be decided at a later date.

After general questions were addressed, the group focused on individual topics that need to be addressed by this sub-group. The topics and related discussion is highlighted below.

HIRING

- Recruiting caregivers will be a concern, especially regarding how/where interviews are conducted, etc.
- What will be the attendant's rights? How will they know their limits in terms of services that they provide? These issues need to be addressed.
- Background checks would be nice, but will there be any accounting for gaps that may appear?
 Will family members be required to go through background checks?
 - The group was in full support of background checks as long as the consumer was allowed to make the final decision of whether or not to hire an individual based on the results.
 - Liz suggested the use of the AZ Supreme Court website for background info: http://www.supreme.state.az.us/publicaccess/notification/default.asp
 - o April will provide links to public information sites regarding state sex offenders, etc.

- What will be the requirements for prior experience? What happens if consumers choose individuals that have no care giving experience?
 - Letters of recommendation could be one option.
- Who is responsible for attendant costs? These need to be addressed.
 - Travel (Rural areas)
 - o Training
- Will there be any medical parameters? Will members have to disclose all illnesses/diseases?
 What about caregivers? How does HIPAA affect these decisions?
 - o Will TB tests/physicals be required?
 - o Courses on Universal Precautions?
 - Currently, agencies provide rubber gloves, etc. Who would be responsible for this in the new model? Agencies also provide Hep. B vaccines – will they still be available? And who will cover the expenses?
 - What are the caregivers rights regarding medical knowledge of their employer (consumer). A way to protect caregivers needs to be built in – could this be addressed through training? Regarding training – will there be leeway in terms of the timeframe? This could be a major concern, especially for backup caregivers.
- Caregiver job requirements should be created by each consumer responsibilities, weight (lifting) requirements, special needs, etc.
- Will attendants have knowledge of other caregivers in the area? Coordination among caregivers would be beneficial, especially in terms of backup coverage, etc.
 - The member will have to take some responsibility for what happens if a worker does not show up. They should have a contingency plan.
 - Case managers may want to consider having service contingency plans; maybe a list of registered attendants could be created and provided to members in case their regular care giver cannot come on a given day.
- Extra money for special services:
 - How will flexible schedules be accounted for? What if the consumer requests services at midnight, etc? Would they be able to pay more to get services during off hours?
 - The great thing about CDC will be that schedules can vary they aren't dictated by an agency's hours. This will require increased communication among consumers and caregivers.
- How will special services beyond the normal routine be handled?
 - Will there be any guidelines for attendant choice vs. consumer choice? What happens if attendant is not comfortable with requests? How will emergency situations be handled? Is there a pay difference for different types of services?
- Is the budget going to be set in terms of hours and in terms of dollar amount?
 - This group feels that, if a budget schedule is going to be set, it should be dollar based rather than hour based.
 - The attendant and consumer will have to communicate regarding services, etc.
 Compassion will also play into this.
- Will the budget be weekly? Monthly? Semi-annually? Is there any flexibility with the budget and how will that be determined?
- How will the Service Gap Log be affected? Will it still be utilized?
 - The Legal sub-group should discuss this.
- Does the rate of pay need to be included in the Attendant Care policies that this group will be creating?
 - o Will the Fiscal Intermediary group have any say in this? Will they handle the documentation portion of this topic?
 - o It will be important to consider member wants they may want to pay more for quality services as well as certain types of tasks, etc.

WORKMAN'S COMPENSATION

- Is workman's comp an option for caregivers?
 - o Would it be possible for the Legal group to look into this issue and provide feedback?

BENEFITS

- Things to consider:
 - Liability Insurance how to protect members as well as workers
 - o 401K
 - o FICA
 - Unemployment

GENERAL COMMENTS

- Success of this program may hinge on what types of skilled nursing activities are allowed
- Peer support in terms of training each other how to handle caregivers, etc. would be a wonderful component of the program.

CLOSING REMARKS/ASSIGNMENTS

- Hiring will be the main topic of conversation for the next meeting.
 - Gwen will put together a module to work through.
 - o Topics will include hiring, benefits, and background checks.
- Questions to look into:
 - o Do attendants get paid to go through training?
 - o What, if any, preliminary requirements will be paid for and by whom?
 - Will AHCCCS cover fingerprinting and background checks if the group decides they are mandatory? If so, will these things be paid for in advance or as a reimbursement?

4. Action Items						
Action	Assigned to	Due Date	Status			
Hiring Module	Gwen Dean		In Progress			
Background Check Information	April Charpiot 2/28/07		In Progress			
Best Practices, Other State Models Jakenna Lebsock		2/28/07	In Progress			
Attendant Training Samples	Jakenna Lebsock	2/28/07	In Progress			
Member Profiles Jakenna Lebsock		2/28/07	In Progress			
Conceptual CDC/Attendant Care Jakenna Chart Jakenna Lebsock/Julie Bubul		2/28/07	In Progress			

5. Next Meeting								
Date:	February 28, 2007	Time:	11:00-2:30	Location:	AHCCCS – 801 E. Jefferson, Ocotillo Room – 4 th Floor			